POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Mrs		8/1/00
O.I.P.E. CLASSIFIER		21	8/22/00
FORMALITY REVIEW		75353	9-23-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

09/635,330

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

BEST AVAILABLE COPY

9/6/04

Claim		Date									
Final	Original										
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	2	✓	✓	✓							
	3	✓	✓	✓							
	4	✓	✓	✓							
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	6	✓	✓	✓							
	7	✓	✓	✓							
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If more than 150 claims or 10 actions
staple additional sheet here

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